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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number 09955 (2000)

Substitute for Form PTO-875									09455600		
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY								OR	OTHER THAN SMALL ENTITY		
	FOR	N	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FEE
	SIC FEE CFR 1.16(a))							s	OR		,
	TAL CLAIMS CFR 1.16(c))		minus 2	0 = .		1	x \$ =	 	OR	× \$ =	
IND	EPENDENT CLA CFR 1.16(b))	IMS	minus 3 =		1.		x \$ =	l	1		
		ENT CLAIM DD				1			OR	X \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						J	+ 5 =		100°C	+5=	•
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	
CLAIMS AS AMENDED - PART II										AL	
					(Column 3)	_	SMALL E	ENTITY	OR	OTHE SMALL	R THAN ENTITY
AMENDMENT A		CLAIMS REMAININ AFTER AMENDMEI	IG	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	CADDI- CHONAL PERO.
	Total (37 CFR 1.16(c))	•	Minus	••	=		x \$=		OR	x s =	1
	Independent (37 CFR 1.16(b))	•	Minus	***	=		x \$=		OR	x \$ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+5 =		OR	+ s =	
							TOTAL		1	TOTAL	
		(0-1 4)		40.4			ADD'L FEE		OR	ADD'L FEE	<u> </u>
$\overline{}$		(Column 1)		(Column 2) HIGHEST	(Column 3)	1			1		
DMENT B		REMAINING AFTER AMENDMEN		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	. /	Minus	" 20	-		x \$ =		OR	x s =	
AMEN	Independent (37 CFR 1.16(b))	. /	Minus	··· 3	=		x \$ =	· · · · · · · · · · · · · · · · · · ·	OR	x \$ =	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								OR	+ \$ =	
				<u>.</u>			TOTAL	· ·		TOTAL	
							ADD'L FEE	<u></u>	OR	ADD'L FEE	
		(Column 1) CLAIMS		(Column 2)	(Column 3)	1			1		1
AMENDMENT C		REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	**	=		x \$=		OR	× \$ =	
	Independent (37 CFR 1.16(b))	•	Minus	***	=		× \$ =		OR	× \$ =	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$ =		OR	+ s =	
	TOTAL									TOTAL	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3									OR	ADD'L FEE	L

[•] If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.